

PART III. OTHER

DZIAŁ III. RÓŻNE

JOB SATISFACTION AMONG NURSES IN THE PODKARPACKIE VOIVODESHIP  
IN POLAND

SATYSFAKCJA ZAWODOWA PIEŁĘGNIAREK W WOJEWÓDZTWIE PODKARPACKIM  
W POLSCE

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- A. Study design/planning  
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- B. Data collection/entry  
zebranie danych
- C. Data analysis/statistics  
dane – analiza i statystyki
- D. Data interpretation  
interpretacja danych
- E. Preparation of manuscript  
przygotowanie artykułu
- F. Literature analysis/search  
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- G. Funds collection  
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Summary

**Background.** The study aimed to examine the level of satisfaction of nursing staff with their professional work and determining the factors influencing this satisfaction.

**Material and methods.** The research was conducted in 2020 in Podkarpackie Voivodeship, Poland, and comprised 435 nurses. The data were collected using the authors' questionnaire, the Minnesota Satisfaction Questionnaire, and the Job Satisfaction Scale.

**Results.** More than half of respondents are satisfied with their work and working conditions. Regarding problematic situations at work, 59.3% received sufficient help from other staff members. The main reason for dissatisfaction among nurses was low salary and working under pressure (>50%).

**Conclusions.** According to the results, the nursing staff are devoted to their work and, in most cases, find it satisfying. Working with other people and providing help in difficult situations is of high value to all of them. It influences their job satisfaction, often undermined by difficult working conditions, low pay, and immense pressure.

**Keywords:** personal satisfaction, job satisfaction, nurses, nursing, work

Streszczenie

**Wprowadzenie.** Celem pracy było zbadanie poziomu satysfakcji personelu pielęgniarskiego z pracy zawodowej oraz określenie czynników wpływających na tę satysfakcję.

**Materiał i metody.** Badania przeprowadzono w 2020 roku w województwie podkarpackim i objęto nimi 435 pielęgniarek. Dane zebrano za pomocą autorskiego kwestionariusza, Minnesota Satisfaction Questionnaire oraz Job Satisfaction Scale.

**Wyniki.** Ponad połowa respondentów jest zadowolona ze swojej pracy i warunków pracy. Jeśli chodzi o problematyczne sytuacje w pracy, 59,3% otrzymało wystarczającą pomoc od innych pracowników. Głównym powodem niezadowolenia pielęgniarek były niskie zarobki i praca pod presją (>50%).

**Wnioski.** Z uzyskanych wyników wynika, że personel pielęgniarski jest zaangażowany w swoją pracę i w większości przypadków jest z niej zadowolony. Praca z innymi ludźmi i niesienie pomocy w trudnych sytuacjach jest dla nich wszystkich bardzo cenne. Wpływa to na ich satysfakcję z pracy, często nadszarpniętą trudnymi warunkami pracy, niskim wynagrodzeniem i ogromną presją.

**Słowa kluczowe:** satysfakcja osobista, satysfakcja z pracy, pielęgniarki, pielęgniarstwo, praca

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## Introduction

For most people, work is one of the most essential parts of everyday life. It also dramatically impacts the overall quality of life. Everyone perceives and defines the role of professional work in their daily life slightly differently, depending on the discipline in which they are engaged. However, one aspect remains unchanged – having a job is closely related to a specific feeling of satisfaction and well-being [1].

An ordinary person spends an average of 160 hours a month at work. It means nearly 2,000 hours throughout the year. Therefore, since work takes up such a large part of a person's life, it should be a daily source of satisfaction and self-fulfillment. The latter is often associated with professional development, which is obligatory in the Polish context in accordance with the Act on the Professions of Nurse and Midwife (Journal of Laws of 2011, No. 174, item 1039). The Act also grants nurses and midwives independence and defines their responsibilities [2,3]. Work in the nursing profession is based not only on experience, but also on an increasingly stronger scientific and research foundation, and professional competence allows nurses to demonstrate autonomy and professionalism [4,5]. The scope of tasks performed in this professional group is consistent with social expectations [4,6]. These expectations are very high, and a sense of job satisfaction, as well as one's life situation, can help nurses meet them. This raises the need to conduct research aimed at finding out about nurses' personal opinions regarding factors influencing their sense of job satisfaction.

According to Zalewska [7], job satisfaction means a person's attitude towards work [8]. It expresses an estimation of how suitable the work is for the person. This assessment has two components – cognitive and emotional. The cognitive component is referred to as job satisfaction. It includes judgments and beliefs about the employee's opinion about work and includes a cognitive assessment of their work and attitude towards it. The emotional component understood as well-being at work, includes the feelings associated with it, the nature and intensity of emotional states, and the typical mood experienced by an employee at work [9]. Professional satisfaction significantly affects self-esteem and determines better fulfilment of one's own life needs [10]. The mission of the nursing profession is to help other people in a situation of suffering, disease and disability. The resulting high mental burden, as well as undervaluation in the economic sphere, may lead to a decrease in the level of job and life satisfaction. The daily stress, negative emotions and psychological pressure experienced by nurses in their daily work may affect the sphere of personal life [9,11-14]. When combined with the lack of support from the environment and individual features of a person, these factors may lead to the so-called burnout syndrome [15-17].

Recently, researchers have frequently examined job satisfaction in the nursing environment. Referring in their studies to working conditions, pay, professional and non-professional activity, motivation, and self-fulfillment, they try to find a universal way to improve the living conditions of nursing staff [18]. This problem, due to its topicality and timeless character, was an inspiration for this work.

Job satisfaction plays an extremely important role in the life of every working person. It affects mental hygiene, general physical well-being, interpersonal relationships and increases or decreases the quality of life. The main goal of work is the production of specific goods or the provision of services. In case of the nursing profession, it is the provision of medical services that are socially valuable because they improve the quality of life of individuals and society as a whole. Nurses with a high level of job satisfaction provide high quality care and maintain a high level of patient satisfaction. It should be mentioned that low job satisfaction may have serious consequences for the health care system [19].

The study aims to examine the level of satisfaction of nursing staff with their professional work and determine the factors that affect this satisfaction.

## Material and methods

### *Measurements/Instruments*

The research method used in the work was a diagnostic survey. The research tools used to gather the data were: a purpose-built authors' questionnaire, the Minnesota Satisfaction Questionnaire, and the Job Satisfaction Scale.

The purpose-built authors' questionnaire consisted of 30 single-choice and multiple-choice questions. Questions for the survey were created after analyzing the literature on job satisfaction among nurses and the results of various authors [20-22].

The first part of the questionnaire contained demographic questions about age, work experience, place of residence, and education (among others). The next part included questions about working and pay conditions, environmental factors and individual personal characteristics that may affect job satisfaction. The pilot study of the questionnaire was conducted among 40 nurses. In the pilot study, the persons who completed the questionnaire did not report any errors or misunderstandings of the questions contained in the questionnaire. These questionnaires were then included in the pool of all questionnaires.

The Minnesota Satisfaction Questionnaire – Short Form (MSQ SF) – was formulated by employees of the University of Minnesota in the 1970s [23]. Its purpose is to explore what employees like and dislike about their work. It contains questions about the choice of profession, life satisfaction, and 20 statements about occupational tasks, decision-making, professional skills of the staff, independence, opportunities for promotion and development, and interpersonal relations between colleagues, to which the respondent is to respond using five possible answers: “very dissatisfied”, “dissatisfied”, “neither satisfied nor dissatisfied”, “satisfied” and “very satisfied” [24]. Martins and Proença [25] used confirmatory factor analysis to evaluate the construct validity of the questionnaire. Through this statistical procedure, they confirmed the validity of the questionnaire ( $p < .001$ ). Furthermore, they assessed the reliability of this questionnaire using Cronbach's alpha coefficient. The Cronbach's alpha respective results for the overall, intrinsic, and extrinsic satisfaction was obtained 0.91, 0.86 and 0.88 [25].

The Job Satisfaction Scale (JSS) was created in 2003 by Diener et al. in 1985, based on the Satisfaction with Life Scale, whose author is Zalewska [26]. This scale consists of five statements relating to the general perception of work that gives (or does not give) satisfaction. The respondents were asked to respond to these statements on a 7-point scale where 1 equals “I strongly disagree” and 7 represents “I strongly agree”.

### *Data collection/Procedure*

The research was carried out on 435 nurses working in four hospitals in the Podkarpackie Voivodeship, Poland, who expressed their willingness to participate in the study. The nurses came from surgical and non-surgical departments of the hospital. It was conducted in January and February 2020. Before the commencement of the study, the researchers obtained written consent from the directors of institutions to conduct the survey. Participation was voluntary and anonymous. The study was approved by the Bioethical Committee of Regional Medical Chamber in Tarnow, Resolution No. 5/0177/2018.

### *Data analysis*

The Mann-Whitney test and the Kruskal-Wallis test were used in the study. The choice of tests was due to the lack of normality of variable distributions (verified with the Kolmogorov-Smirnow test). The level of significance was  $p < .05$ . The calculations were made with SPSS 25 software.

## Results

### Characteristics of the studied group

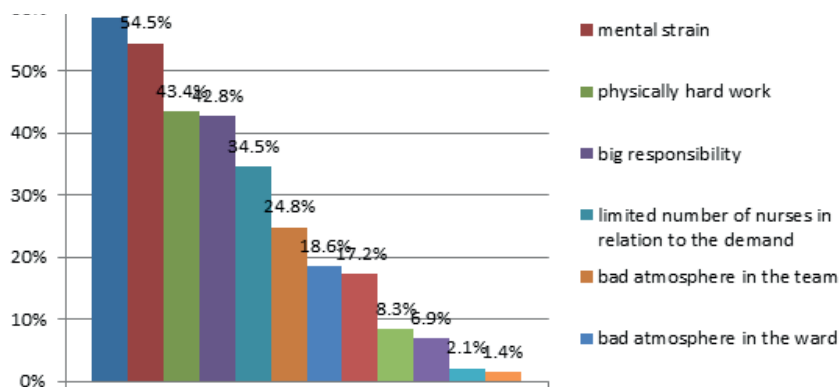
435 nurses were included in the study. All respondents were female. Most respondents (88.3%) were employed under a full-time contract. However, in a few cases, work was performed on other contracts (Table 1).

**Table 1.** Characteristics of the studied group.

Variable		Nurses	
		N	%
Age	>60 years old	3	0.7
	51-60 years old	48	11.0
	41-50 years old	87	20.0
	31-40 years old	93	21.4
	25-30 years old	204	46.9
Workplace	surgical department	240	55.2
	Non-surgical department	195	44.8
Type of employment	Full-time contract	384	88.3
	Part-time contract	6	1.4
	Three-quarter time contract	3	0.7
	Replacement contract	30	6.9
	Contract	12	2.8

Notes: N – number of nurses.

Dissatisfaction at work was most often caused by low salary (58.6%) and mental strain (54.5%). Physically hard work came third (43.4%), and heavy responsibility fourth (42.8%) (Figure 1).



**Figure 1.** Aspects at work that cause dissatisfaction

The average level of job satisfaction (scale of 20-100 points) was  $68.87 \pm 8.96$  points and ranged from 48 points to 88 points. The average result of the overall level of job satisfaction measured on a 1-5 point scale was  $3.44 \pm 0.45$  points. Nurses scored the highest job satisfaction regarding freedom of action ( $3.69 \pm 0.45$  points). Satisfaction with work in terms of remuneration and use of working time ( $3.56 \pm 0.53$  points) and the possibility of influencing the course of work ( $3.53 \pm 0.53$  points) were slightly lower. The lowest results were obtained for subordination resulting from the nature of work ( $3.30 \pm 0.55$  points) and the possibility of self-actualization ( $3.27 \pm 0.59$  points).

The overall level of job satisfaction measured with the JSS scale was  $21.04 \pm 5.19$  points on a scale of 5-35 points. However, the results fluctuated in the range of 8-35 points and half of the people scored below 21 points (Table 2).

**Table 2.** Minnesota Satisfaction Questionnaire – Short Form (MSQ SF) and Job Satisfaction Scale (JSS) and Job Satisfaction and Age

Job satisfaction	Minnesota Satisfaction Questionnaire – Short Form – General results			Age				p
	Average	SD	Me	25-30 y. o.		Over 30 y. o.		
				Average	SD	Average	SD	
Possibility of self-actualization	3.27	0.59	3.20	3.34	0.57	3.21	0.60	0.119
Remuneration and use of time at work	3.56	0.53	3.67	3.65	0.52	3.48	0.52	0.036
Freedom of action	3.69	0.45	3.75	3.75	0.44	3.64	0.45	0.095
Subordination resulting from the nature of work	3.30	0.55	3.40	3.35	0.55	3.25	0.55	0.292
Ability to influence the course of work	3.53	0.53	3.67	3.60	0.52	3.47	0.54	0.080
Overall job satisfaction	68.87	8.96	71	70.21	9.02	67.69	8.79	0.060
Overall job satisfaction (average)	3.44	0.45	3.55	3.51	0.45	3.38	0.44	0.060
Job Satisfaction Scale (JSS)	21.04	5.19	21	21.90	5.40	20.29	4.90	0.065

Notes: SD – standard deviation, Me – median, min – minimum, max – maximum.

The level of job satisfaction measured with the MSQ SF scale and the JSS scale did not differ significantly between people working in the surgical ward and nurses employed in the non-surgical ward. However, a slightly higher level of job satisfaction among nursing staff working in surgical wards was observed (21.50±5.38 points vs 20.48±4.92 points).

It was shown that nurses aged 25-30 had a higher level of satisfaction with remuneration and the use of time at work (3.65 points) than those over 30 (3.48 points). Slight differences also indicated that the respondents from the 25-30 age group had a higher level of satisfaction with the freedom to act ( $p=0.095$ ) and the ability to influence the course of work ( $p=0.080$ ). Their overall level of job satisfaction ( $p=0.060$ ) and job satisfaction measured with the SSP scale ( $p=0.065$ ) were higher (Table 2).

The place of residence, marital status, level of education and seniority in the profession of nurses did not significantly affect the level of job satisfaction.

Nurses working under a full-time employment contract (3.34 points) were satisfied with the subordination resulting from the nature of work more often than those who did not have such a contract (2.99 points). Slight differences also indicated that the respondents working full-time were more satisfied with the possibility of self-fulfillment (3.31 points). Also, their overall level of job satisfaction was higher ( $p=0.080$ ) than those working under a short-term contract of employment or part-time / replacement or contract (Table 3).

**Table 3.** Job satisfaction and type of employment

Type of employment	Full-time employment contract		Contract for part-time work / replacement / contract		p
	Average	SD	Average	SD	
Possibility of self-actualization	3.31	0.58	3.01	0.62	0.084
Remuneration and use of time at work	3.56	0.54	3.57	0.44	0.917
Freedom of action	3.68	0.45	3.76	0.38	0.490
Subordination resulting from the nature of work	3.34	0.53	2.99	0.61	0.031
Ability to influence the course of work	3.53	0.54	3.53	0.50	0.624
Overall job satisfaction	69.20	8.92	66.35	9.10	0.225
Overall job satisfaction (average)	3.46	0.45	3.32	0.46	0.225
Job Satisfaction Scale (JSS)	21.33	5.14	18.88	5.16	0.080

Notes: SD – standard deviation, p – level of statistical significance.

It was shown that the level of job satisfaction was the lowest among nurses whose mood was reflected in the household members after returning from work. The level of job satisfaction was higher in the respondents who tried to separate professional matters from family life. It was the highest among those who automatically had a good mood after seeing their family members ( $p<0.05$ ).

It was shown that respondents who had the opportunity to use their professional qualifications had a significantly higher level of job satisfaction ( $p=0.044$ ) than those who could not unequivocally assess the possibility of using their qualifications in the ward (19.17 points) or did not have such a possibility (16.33 points) (Table 4).

**Table 4.** Job satisfaction and the use of one's qualifications in the labor department

Use of one's qualifications in the labor department	Definitely yes / rather yes		Hard to say		Rather not / definitely not		<i>p</i>
	Average	SD	Average	SD	Average	SD	
Possibility of self-actualization	3.30	0.59	3.17	0.54	2.77	0.43	0.078
Remuneration and use of time at work	3.57	0.54	3.50	0.28	3.28	0.25	0.137
Freedom of action	3.71	0.44	3.58	0.34	3.33	0.61	0.172
Subordination resulting from the nature of work	3.32	0.54	3.17	0.56	2.80	0.64	0.118
Ability to influence the course of work	3.54	0.51	3.61	0.71	3.11	0.69	0.235
Overall job satisfaction	69.32	8.81	67.33	8.52	60.33	9.56	0.069
Overall job satisfaction (average)	3.47	0.44	3.37	0.43	3.02	0.48	0.069
Job Satisfaction Scale (JSS)	21.34	5.12	19.17	4.83	16.33	5.09	0.044

Notes: SD – standard deviation, *p* – level of statistical significance.

It has been shown that the higher the level of satisfaction with working conditions, the higher the level of job satisfaction. The analysis of the data showed that nurses who had better relations with their superiors also had higher job satisfaction. For nurses who considered their supervisor a source of motivation to work, the level of job satisfaction was more often significantly higher ( $p<0.05$ ).

It was found that the higher the satisfaction with the amount of remuneration, the higher the level of satisfaction with selected aspects of professional work ( $p<0.001$ ). A higher level of job satisfaction correlated with higher satisfaction with being among colleagues. Nurses who more often received support from team members during difficult situations simultaneously had a higher level of job satisfaction. Nurses who claimed that they had the opportunity to express their opinion in the workplace freely had at the same time a higher level of job satisfaction ( $p<0.05$ ).

## Discussion

We often do not realize the vital role professional activity plays in our lives and its influence on us [27]. For some, it gives satisfaction and is a driving force for life, while for others, it is only a source of frustration and constant stress. In a caring profession such as nursing, due to its specific nature, there are as many employees satisfied with their work as those dissatisfied [28]. When working in health care institutions, employees are particularly exposed to mental strain. It is related to high responsibility, tension, daily work in complex, stressful conditions and constant contact with people [27,29-31]. Research on job satisfaction in various environments is a frequent topic of publications. However, it is different when it comes to nursing. Researchers are reluctant to take up this topic. The reasons for such a state of affairs can be seen in the tremendous diversity of the environment as well as in challenging working and pay conditions, which can often translate into issuing opinions.



The level of job satisfaction of health care workers in Poland is relatively low, as it is estimated that only about 55% of nurses declare that they are satisfied with their work [32]. Similar conclusions were drawn from the NEXT survey across the European Union. They showed that Polish nursing staff is characterized by the lowest satisfaction among all 10 countries where the survey was conducted [33]. The study carried out in 1998-1999 covering countries such as the United States, Canada, Scotland, Great Britain, and Germany also puts Poland at the top regarding dissatisfaction. When analyzing the results, it can be noticed that in the United States (which was at the top of the ranking), 41% of respondents were dissatisfied with their work. On the other hand, Germany has the most significant number of satisfied nurses because only 17% of nurses were dissatisfied there [34].

As for Norway, the situation is very similar to that of Germany. There was also a much higher job satisfaction among nurses compared to Poland. Only about 16% of nurses in that country are estimated to be dissatisfied [35]. The current study showed that the employee's age is essential to satisfaction. Younger respondents (between 25 and 30) declared a significantly higher level of it than people over 30 years of age. It may be related to insufficient knowledge of the realities in the environment, adolescent optimism, or perhaps a lack of negative experiences related to short work experience [36]. However, the results of the study by Humpel and Caputi [37], contrary to the previously cited ones, led to the opposite conclusion. Their study showed that with the duration of employment, the level of confidence in action increases and the level of stress decreases, which determines the increase in the level of general job satisfaction [37]. Similar conclusions were reached by Schulz and Schulz in 2002, who specified age as a crucial factor determining job satisfaction [28]. They noticed, like Humpel and Caputi, that job satisfaction increased with the age of respondents. The studies of Bee, and Lipińska and Głowacka show that people achieve the highest level of job satisfaction when they reach middle age of adulthood. Other factors, equally significantly influencing satisfaction and correlating with age, are responsibility at work, which increases with age, and professional experience, which increases over time, causing a sense of a better fit [38,39].

The research conducted in Poland primarily focused on identifying factors that could adversely affect employee satisfaction. The current study, similarly to those of Gawędy et al. from 2018 [40] and by Sowińska et al. [41], showed that one of the main determinants significantly impacting the decline in the level of job satisfaction among nurses is low remuneration. 95% of the surveyed employees agreed with this point [40]. As in the studies mentioned above, the current research results showed that more than half of the respondents (58.6%) are not satisfied with their earnings. It was found that the higher the satisfaction with the remuneration, the higher the level of satisfaction with selected aspects of professional work. The second most frequent reason for dissatisfaction was mental burden (54.5%), and the third was physically demanding work, indicated by 42.8%. However, it is not only in Poland that the nursing community is not fully satisfied with their salary. Research conducted in Sweden by Holmberg et al. in 2016 showed that the main reason for the decrease in motivation in the work of nurses is underpayment [42]. On the other hand, the data analysis performed by Aiken et al. [34] showed that the US and Canadian nurses' salary did not negatively affect job satisfaction.

Nurses in Poland constitute one of the most numerous occupational groups. Still, the specific and challenging working conditions in this profession mean that there are still staff shortages in this area both in Poland and in the entire European Union. One of the reasons for this situation is that some nurses stop working in the profession long before retirement. The scale of the phenomenon is so large that the EU decided to establish an international research program NEXT aimed at studying the causes for this situation and its consequences. Interestingly, the research results showed that Polish nurses are among some of the most devoted to the profession. As many as 64% of respondents in the last year have never considered leaving their professional careers. The situation was similar in Slovakia and Belgium [32]. The current research showed a similar

commitment – 40% of the respondents would rather not decide to quit their job in health care, and 19.3% firmly declared a lack of willingness to quit it. However, the NEXT program has shown that the situation is different in Italy and Great Britain, which face grave problems in terms of nurses wanting to leave the profession [32].

It has been demonstrated that relationships with superiors in the workplace often translate into job satisfaction among subordinates. For example, the current study showed that in places where the supervisor was a source of motivation and support for the employee, there was a permanently higher level of job satisfaction than where these relations were, to some extent, strained. Similarly, Baruk showed in her research that the superior's proper way of treating staff members positively impacts their satisfaction level, and disturbances in these relations cause a marked decrease [43].

Analyses by Kwiecień-Jaguś et al. also confirm that high job dissatisfaction among nursing staff is associated with poor internal organization of the workplace, conflicts with superiors and lack of understanding between nurses and their superiors. Job satisfaction was thought to be complex, and collaboration between individual nurses, their supervisors and others is critical to enhancing nursing satisfaction through an empowering and open work environment [44,45].

Also, the atmosphere and contacts in the work group seem to be of great importance in terms of job satisfaction. According to Baruk's research, the relational climate influences them significantly, and working people feel best in a friendly working atmosphere – the highest satisfaction was demonstrated there. Such a location additionally translates into positive relationships conducive to receiving support from colleagues, which cannot be counted on by staff working in an atmosphere of competition. Instead of positive energy, it generates a sense of threat and pressure, significantly lowering overall job satisfaction [43]. The current study showed similar dependencies. The surveyed employees who declared positive relations with their colleagues and could count on their support in difficult situations had a higher level of job satisfaction than those who could not count on such support.

Due to the stress it often provides, professional work can affect employees' personal life and family relationships. Although no one wants their work to interfere with their functioning after returning home, we cannot always control it [46]. The research carried out in Łódź, Poland, in 2014 showed that practically one in four people experienced difficulty separating their professional and private life [43]. The current research led to similar conclusions. 24.1% of respondents admitted that they often have a problem separating professional matters from everyday life and that work events often significantly impact their family relationships. However, more than half of the respondents (62.8%) said they did not feel any major inconvenience. Such a large percentage in this group may be because nurses need to be highly organized and task-oriented in their work. Therefore, it may be easier for them to find specific activities to relieve tension and focus on other aspects of life, forgetting about work after the end of the shift.

The current research has shown that a relatively low job satisfaction among nurses translates directly into a decrease in their overall satisfaction with life. On the other hand, research conducted by CBOS in 2019 showed that 80% of Polish society is generally satisfied with life [47]. It can be assumed that the nursing staff shows such a low result in this area due to the feeling of being undervalued – both in the financial sense (more than half of the respondents are dissatisfied with their remuneration) and in the intellectual sphere – only 33.8% of the respondents clearly stated that they could make full use of their qualifications at work. The current research has also shown that people who had the opportunity to use their professional qualifications had a significantly higher level of job satisfaction than those who could not unequivocally assess the possibility of using their qualifications or they did not have such a possibility.

It cannot be denied that job satisfaction in such a broad and diverse professional group as the nursing staff is a highly controversial topic. There are many opinions on this subject. The reasons for this phenomenon can



be seen in the multitude of institutions with diverse profiles and specificity. However, the current research has revealed that the hospital environment does not generate significant differences in satisfaction depending on the profile of the ward. The main reasons declared by the respondents for their lower job satisfaction were the amount of remuneration, as well as excessive physical effort or mental stress constantly accompanying them in their daily work. Additionally, it is noteworthy that relationships with superiors and colleagues seriously impact the working environment. Staff feel much better in an atmosphere of friendliness rather than competition. Employees value cooperation, mutual support and trust more than rivalry and a race to achieve better results than their colleagues.

The results of this study confirm that there are still factors that negatively affect the satisfaction of nurses. The development of nursing practice should further promote job satisfaction among nurses, both in terms of internal factors (demographic and emotional variables) and external ones (nature of work and environmental variables). The study's findings once again encourage health policymakers to carefully consider factors, particularly external, that can be modified to enable improvement in satisfaction with the nursing profession. The job satisfaction level of nurses should be measured and identified, and respective actions should focus on increasing job satisfaction. Job satisfaction is very important for the healthcare system because it affects the satisfaction level perceived by patients. Most factors determining job satisfaction and motivation levels should be considered by superiors and adequately modified. The education of nursing leaders is therefore necessary. As well as financial incentives, non-material motivation actions are expected [48].

#### *Limitations*

The survey results refer to the nurses who took part in the survey. According to the data of the Statistical Office in Rzeszów, Poland, 12.7 thousand nurses worked in the Podkarpackie Voivodeship in 2018 [49]. It means that the sample is not representative and the conclusions cannot be generalized, but we plan to extend the research to the entire Podkarpackie and Małopolskie voivodeships. A limited group of respondents may result from the fact that there is little interest among this professional group in participation in studies. The study was conducted in a small environment only and the possibility of generalizing the study may raise some concerns. Therefore, further research is needed in different settings to increase generalizability. The causes of such an attitude need to be considered and ways to encourage nurses to participate more in research ought to be devised. Another limitation of the study was that only women were studied. This situation can affect the results because the feelings experienced by women differ from those experienced by men. Therefore, further studies with larger samples and gender equality are needed to obtain more accurate results.

With the ever-changing health of society, hospitals will have to recognize the importance of job satisfaction. One of the key challenges for any organization is maintaining the level of employee satisfaction and increasing their motivation. These studies should be carried out in all healthcare facilities in the country over the next few years; also it would be necessary to monitor the job satisfaction of health professionals in other areas of medicine.

This study revealed several areas that require further research efforts and generated many questions that require further investigation. In particular, exploration should focus on examining the environment and other factors affecting job satisfaction, such as leadership style.

#### **Conclusions**

Satisfaction from the work of nursing staff is extremely important to provide the highest possible level of care to patients. The results of the study show which aspects that we may influence are positively related to nurses' job satisfaction. The main factors causing dissatisfaction among staff were the level of remuneration,

mental and physical strain and heavy responsibility. On the other hand, the staff saw the possibility of raising satisfaction by an increase in salary and the number of nursing and support staff. It was also shown that a higher level of satisfaction was experienced by employees who effectively separate their private and professional life than those who transferred their mood to household members after their shift. Job satisfaction was increased by factors such as the possibility of using their qualifications in practice, good relations with superiors and colleagues, and the possibility of expressing one's opinion in the work environment. Staff with the support of co-workers in challenging situations and for whom the supervisor was the source of motivation also manifested a higher level of job contentment. In addition, it was shown that employees willing to recommend others to work in their ward and hospital showed higher professional contentment.

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